Arkansas Insurance Department

Asa Hutchinson Governor



Alan McClain Commissioner

BULLETIN NO.:

13-2022

TO:

ALL LICENSED PROPERTY INSURERS, FARMERS MUTUAL AID COMPANIES AND ASSOCIATIONS, NATIONAL ASSOCIATION OF INSURANCE COMMISSIONERS, TRADE ASSOCIATIONS, AND OTHER

INTERESTED PARTIES

FROM:

ARKANSAS INSURANCE DEPARTMENT

SUBJECT:

ASSESSMENT BY ARKANSAS RURAL RISK UNDERWRITING

ASSOCIATION

Arkansas Code Annotated § 23-88-306(a)(3)(A) provides that, "The governing board shall be empowered to make assessments as may be necessary to provide funds needed to make payment of all loss claims and expenses of the association."

Arkansas Code Annotated § 23-88-306(d) further provides that members of the Arkansas Rural Risk Underwriting Association ("ARRUA") may be assessed an amount not to exceed two hundred dollars (\$200.00) annually, if needed, for expenses of mailing volunteer fire department renewal subscription notices.

Pursuant to the statute cited above, the ARRUA Board has determined that an assessment is needed for the year 2022.

The attached form and remittance of two hundred dollars (\$200.00) per company, made payable to the "Arkansas Rural Risk Underwriting Association" must be mailed to ARRUA, Dept. #40153, PO Box 9668, Conway, AR 72032. The assessment is due by December 31, 2022.

Questions regarding this Bulletin should be directed to Becky Harrington, Property and Casualty Compliance Officer, Arkansas Insurance Department, Compliance Division, at 501-371-2800 or by e-mail at Becky.Harrington@arkansas.gov, or Brenna Graham, ARRUA Plan Manager, at 479-636-2872 or by e-mail at Brenna@fpmutual.com.

ALAN MCCLAIN

ARKANSAS INSURANCE COMMISSIONER

DATÉ

ARKANSAS RURAL RISK UNDERWRITING ASSESSMENT ACTS 2003, No.1326

DUE BY DECEMBER 31, 2022 Mail this form to: ARRUA

Dept. #40153 P.O. Box 9668 Conway, AR 72032

DATE:	
NAME OF COMPANY*:	
NAIC	
COMPANY CONTACT NAME:	
COMPANY CONTACT PHONE NUMBER: E-MAIL ADDRESS:	· .
CHECK	
AMOUNT OF CHECK: \$200.00 FOR EATHE ARKANSAS RURAL RISK UNDERWRITING ASSOCIATION TO MANAGER, AT THE ADDRESSABOVE)	ACH COMPANY REPORTED ON THIS FORM- REMIT TO TO THE ATTENTION OF BRENNA GRAHAM, ARRUA PLAN
*Please note that if submission is made for a group of companies, ea	ach company and its NAIC number must be listed here:
Name of Company	NAIC#
	·
	,
	
	·
(Attach additional pages if required)	· · · · · · · · · · · · · · · · · · ·